ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate	level produced by rate revision effective	06/04/2007
(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger-Commercial	\$2,262,450	0.0%
2. Automobile Physical Damage		
Private Passenger Germercia	\$ 1,411,086	0.0%
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
	y (territories) or certain classes? If so, specify:	
	with base rate increase of 5.7% for all coverages.	garnzation).
across an coverages. Onset increased discount	With base rate morease of 5.7 % for all coverages.	
*Adjusted to reflect all prior rate change **Change in Company's premium level	which will result from application of new rates	ica Linancial Alliano Name of Company
		Official – Title

	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability	A 0	6.7
	Private Passenger Commercial	\$6,731,855	-5.7
2.	Automobile Physical Damage		
۷.	Private Passenger	3,574,163	-18.1
	Commercial	3,5 7 1,1 05	
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage	**	
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other	<u> </u>	
	Line of Insurance		
3000	Sling only apply to certain territory (f	erritories) or certain classes? If so, specify:	
No No		controlles) of contain classes. It so, openly,	
1,0	· · · · · · · · · · · · · · · · · · ·	***************************************	
		<u> </u>	
Brief (description of filing. (If filing follow	s rates of an advisory organization, specify	organization):
Revi	se rating plan with base rate changes	and offsets resulting in a -10.0% rate level of	change.

Change in Company's premium level which will result from application of new rates.

Amica Mutual Insurance Company Name of Company

Roland D. Letourneau Assistant Vice President Official - Title

SUMMARY SHEET

APR - 5 2007

	Change in Company's premium o revision effective NB: 03/28/	r rate level produce 07 Ren: 05/03/07.	ed by rate	DIVISION C SPRI	r (MPC) Of Insura Ngfield	NCE	
	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	·	(3 Perc Change (+	ent		_
1.	Automobile Liability Private Passenger Commercial	\$16,118,362		+4.	7%		
	Automobile Physical Damage Private Passenger Commercial	\$12,813,532		-6.	9%	-	
3. 4. 5.	Liability Other Than Auto Burglary and Theft Glass					_ _ _	
7.						_ _ _	
٥.	Boiler and Machinery Fire Extended Coverage					_	
12.	Inland Marine Homeowners Commercial Multi-Peril						
14.	Crop Hail Other Line of Insurance					- -	
Doe spe	s filing only apply to certain	territory (territo	ories) or	certain cl	asses?	If	so,
Bri spe	ef description of filing. (If cify organization): Rate and rul	filing following e changes. (Please	rates of see cover	an advisor letter)	y organ	izati	Lon,
. Ac	djusted to reflect all prior rate hange in Company's premium level	e changes. which will result	from appli	cation of r	new rate	s.	

Hilary Ludema, Administrator Personal Automobile Actuarial Dept. Official - Title

Name of Company

30004 (6-77)

Change in Company's premium or rate	e level produced by rate revision effec	tive:April 1, 2007
(1)	(2)	(3)
<u>Coverage</u>	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
Automobile Liability Private Passenger Commercial	\$ 7,114,669	3.0%
Automobile Physical Damage Private Passenger Commercial	\$ 3,802,854	3.0%
 Liability Other Than Auto Burglary and Theft Glass 		
6. Fidelity7. Surety8. Boiler and Machinery		
 Fire Extended Coverage Inland Marine 		
12. Homeowners13. Commercial Multi-Peril14. Crop Hail		
15. Other Line of Insurance		
Does filing only apply to certain territo N/A	ry (territories)or certain classes? If so	, specify:
Brief description of filing. (If filing folio	ws rates of an advisory organization,	specify organization):
* Adjusted to reflect all prior rate cha ** Change in Company's premium lev	-	new rates.
	Citiz	zens Insurance Company of Illinois Name of Company
	VP State Management	Man 2 Journal

(1)	(2)	(3)
G	Annual Premium	Percent
Coverage	Volume (Illinois)*	Change (+ or -)**
1. Automobile Liability	2 601 001	2.0%
Private Passenger	3,601,281	0.0%
Commercial 2. Automobile Physical Damage		
Private Passenger	782,323	0.0%
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage 11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain If so, specify: This filing appl Brief description of filing. (If organization, specify organization	ies to all territories and	n advisory
our Safe Driver Premium Credit Pl	an and modifying our Trans	Brer Discount.
* Adjusted to reflect all prior ** Change in Company's premium le result from application of new	vel which will rates.	
	Dairyland Insurance	
	Name of Compa	ny
	Brandon Basken - Actuaria Official - Tit	
	<u> </u>	

H29219D

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective: 04/06/2007

(1)	(2) Annual Premium	(3) Percent Change
Соустаде	Volume (Illinois)*	(+ or -) **
I. Automobile Liability Private Passenger	2,200.000	- 4 %
2. Automobile Physical Damage Private Passenger	1,800.000	- 3 %
3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Worker's Compensation 16. Other	ritories) or certain classes? If so, s	pecify: No
Brief description of filing. (If filing follows r		pecify organization):
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which	th will result from applications of	new rates.
		Direct Auto Insurance Company
		Name of Compuny

Rana financia Underwriting
Official and Title Supervisoro

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APR = 3 2007

Research & Compliance Coord.

Official – Title

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

Form (RF-3)

SUMMARY SHEET

	Change in Company's premium or rat	e level produced by rate revision effective	05/01/07 new 6/05/07 renewal
		(0)	(2)
	(1)	(2)	(3)
		Annual Premium	Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability		
	Private Passenger	\$705,782	-2.4%
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger	\$449,233	-6.3%
	Commercial		
3.	Liability Other Than Auto	· · · · · · · · · · · · · · · · · · ·	
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	 	
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Line of Insurance		
	Line of Insurance		
Door f	iling only apply to certain territory (te	erritories) or certain classes? If so, specify	r•
No	ning only apply to certain territory (to	intolics) of certain classes: It so, speens	,.
NO			
Daiae	description of filing (If filing follows	rates of an advisory organization, specify	arganization)
		symbols to include ISO reference filing #P	
		and making some minor clerical revisions	
year 12	actors to account for model year smit	and making some minor element revisions	to our rate and rule pages.
* A.	djusted to reflect all prior rate change	c	
	hange in Company's premium level w		
	sult from application of new rates.	men win	
10	suit nom application of new rates.		
		Guid	leOne America Insurance
			pany
			Name of Company
			r,
		Rren	da Vanderneck



Form (RF-3)

	Change in Company's premium or rate	level produced by rate revision effective	05/01/07 new 6/05/07 renewal
	(1)	(2)	(3)
	<u>Coverage</u>	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability	7004000	1.407
	Private Passenger Commercial	\$894,280	-1.4%
2.	Automobile Physical Damage		
٥.	Private Passenger	\$506,373	+3.0%
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	·	
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
		'a '	
	tiling only apply to certain territory (te	rritories) or certain classes? If so, specify:	
No			
Brief	description of filing. (If filing follows	rates of an advisory organization, specify of	organization): 2006 DI D1 adjusting model
Base	Kate/lemitory revision, updating our sy	ymbols to include ISO reference filing #PP	-2000-KLF I, adjusting model
year 1	actors to account for model year shift a	and making some minor clerical revisions to	our rate and rule pages.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

GuideOne Elite Insurance Company

Name of Company

Brenda Vanderneck
Research and Compliance Coord.

Official – Title

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APR - 3 2007

DEPH (MPC) BINDION OF INSURANCE SPRINGFIELD

Form (RF-3)

SUMMARY SHEET

	(1)	(2)	(3)
	ζ-/	Annual Premium	Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger	\$250,004	-2.8%
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger	\$138,129	-6.4%
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	iling only apply to certain territory (to	erritories) or certain classes? If so, specify:	
No			

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

GuideOne Mutual Insurance
Company
Name of Company

Brenda Vanderneck
Research and Compliance Coord.

Official – Title

Change in Company's premium or rate level produced by rate

revision effective NB: 03/28/07 Ren: 05/03/07.

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APR - 5 2007

IDFPR (MPC)
DIVISION OF INSURANCE
SPRINGFIELD

(1) (3) Coverage Annual Premium Percent Change (+ or -)** Volume (Illinois)* Automobile Liability Private Passenger \$13,706,310 +5.6% Commercial Automobile Physical Damage Private Passenger \$12,118,172 -5.7% Commercial 3. Liability Other Than Auto Burglary and Theft 5. Glass Fidelity 7. Surety 8. Boiler and Machinery 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing following rates of an advisory organization, specify organization): Rate and rule changes (Please see cover letter) Adjusted to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates.

Owners Insurance Company
Name of Company

Hilary Ludema, Administrator
Personal Automobile Actuarial Dept.
Official - Title

30004 (6-77)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective _		PPA effective 04/01/2007 all busines	
(1)	(2) Annual Premium	(3) Percent	
<u>Coverage</u>	Volume (illinois)*	<u>Change (+ or -)**</u>	
1. Automobile Liability Private			
Passenger	26,052,000	5.3%	
Commercial	·		
2. Automobile Physical Damage		. 7.00/	
Private Passenger	10,011,000	+7.0%	
Commercial 3. Liability Other Than Auto			
Burglary and Theft			
5. Glass			
6. Fidelity			
7. Surety			
8. Boiler and Machinery			
9. Fire			
10. Extended Coverage			
11. Inland Marine			
12. Homeowners			
13. Commercial Multi-Peril14. Crop Hail			
15 Other	***************************************		
15. OtherLine of Insurance			
Does filing only apply to certain territor	y (territories) or certain classes? If so, spec	sify: no	
Brief description of filing. (If filing follow rates and class factors, and adds territors)	vs rates of an advisory organization, specification ories 36 and 56.	y organization): This filing revises annual	
*Adjusted to reflect all prior rate chang **Change in Company's premium level	es. which will result from application of new ra	ites.	
		_	
	Safe	way Insurance Company	
		Name of Company	
	George Shields	- Consulting Actuary, Perr and Knight	
		Official – Title	

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 5/1/07 New Business, 6/1/07 Renewal Business

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -) **
1.	Automobile Liability Private Passenger	1,648,088 ***	7.9%
	Commercial		
2.	Automobile Physical Damage Private Passenger	1,187,604 ***	1.5%
_	Commercial		
	Liability other than Auto		
	Burglary and Theft Glass		
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
10.	Extended Coverage		
11.	Inland Marine		
. —.	Homeowners		
	Commercial Multi-Peril*		
	Crop Hail		
15.	Other		
•	Does filing only apply to certain terr classes? If so, specify: No		
	Brief description of filing. (If filing forganization, specify organization):	We are revising base rates, co	unty factors, Good Partner factors,
•	minor violation factors, OTC deductible	e factors, driver class factors, an	d model year factors. We are also
	introducing Away At School factors.	<u> </u>	······································
	* Adjusted to reflect all prior rate ** Change in Company's premium result from application of new re	level which will	
	*** 7½ months of premium.		Trustgard Insurance Company Name of Company
			Maine of Company

Brett C. Helf, Product Manager Official - Title

SUMMARY SHEET Form (RF-3)

Change i	in Company's premium or rate level p	produced by rate revision effective	5/15/07 for New Business 7/15/07 for Renewals
-	(1)	(2)	(3)
	` ,	Annual Premium	Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1	Automobile Liability		
	Private Passenger	<u>\$4,734,296</u>	+1.0%
	Commercial		
2	Automobile Physical Damage		
	Private Passenger	\$1,381,524	0.0%
	Commercial		
3	Liability Other Than Auto		
4	Burglary and Theft		
5	Glass		
6	Fidelity		
7	Surety		
8	Boiler and Machinery		
9	Fire		
10	Extended Coverage		
11	Inland Marine		
12	Homeowners		
13	Commercial Multi-Peril		
14	Crop Hail		
15	Other		
	ng only apply to certain territory (territ	ories or certain classes? If so, spec	sify:
No			
Brief de	scription of filing. (If filing follows rate	es of an advisory organization, speci	ify organization):
We are r	evising our Medical Payments base r	ate and several of our rating rules.	
	* Adjusted to reflect all prior rate chat* Change in Company's premium le		

** Change in Company's premium level which wil result from application of new rates.

Downstate program

Universal Casualty Company
Name of Company

Kent Lang - Underwriting V.P.
Official - Title

SUMMARY SHEET Form (RF-3)

Change ir	n Company's premium or rate level p	roduced by rate revision effective	5/15/07 for New Business 7/15/07 for Renewals
·	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1	Automobile Liability		
	Private Passenger Commercial	\$28,677,435	+1.3%
2	Automobile Physical Damage		
	Private Passenger	\$19,734,148	0.0%
3	Commercial Liability Other Than Auto		
3 4	Burglary and Theft		
5	Glass		
6	Fidelity		
7	Surety		
8 9	Boiler and Machinery Fire		
10	Extended Coverage		
11	Inland Marine		
12	Homeowners		
13 14	Commercial Multi-Peril Crop Hail		
15	Other		
Does filin No	g only apply to certain territory (territo	ories or certain classes? If so, spec	sify:
Brief des	cription of filing. (If filing follows rate	s of an advisory organization, speci	fy organization):
We are re	evising our Medical Payments base ra	ate and several of our rating rules.	
	* Adjusted to reflect all prior rate cha ** Change in Company's premium lever result from application of new rates ** Adjusted to reflect all prior rate changes in Company's premium lever result from application of new rates	vel which will s.	
•	Atro Program		sualty Company of Company

Kent Lang - Underwriting V.P.
Official - Title